

DISCLOSURE SUMMARY PAGE

FORM

DR-2

(Rev. 01/98)

DISCLOSURE

REPORT

For Office Use Only

Comm. # 6324Indexed 5Audited S

Computer

COMMITTEE NAME (Must be same as on Statement of Organization)

Home Builders Association of Greater Cedar Rapids

Political Action Committee - PAC #6324

IMPORTANT: Indicate type of committee you are reporting for: 2

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

Margaret A. Barvinch

(319) 395-0778

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

Jun. 4, 2008

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Monthly December 31, 2007 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a Notice of Dissolution is filed.)

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 3,523.72

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

340.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

3,863.72

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

2,500.00

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ 1,363.72

UNPAID BILLS (From Schedule D - Attach Schedule D)

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ _____

☐ CHECK THIS BOX IF
AMENDING FORM**COMMITTEE NAME (Must be same as on Statement of Organization)**
 Home, Bldg 13, 2nd Fl, 10000

Home Builders Association of Greater Cedar Rapids
Political Action Committee - PAC #6324

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
7/18/07	ID# CK#	Pass the hat Donations July 19, 2007 General Memb. meeting		\$ 340.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Home Builders Association of Greater Cedar Rapids
Political Action Committee - PAC #6324

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/1/07	ID# CK# 608	Check written to Local HBA for reimbursement to the Vote Plan 2 Coalition	Vote Plan 2 Coalition Contribution - Voting Procedures Linn Co. Board of Supv.	\$ 1,000.00
9/13/07	ID# — CK# 609	Monica Vernon 326 - 23rd St. Dr. SE Cedar Rapids, IA 52403	Campaign Contribution for City Council Position "Cedarapicians for Monica Vernon"	500.00
10/11/07	ID# — CK# 610	Larry D. Sharp 3614 Sue Lane NW Cedar Rapids, IA 52405	Campaign Contribution Running for AT-Large City Council	500.00
11/8/07	ID# CK# 612	Chuck Swore 4609 Iris Ave. NW Cedar Rapids, IA 52405	Campaign (Run-off) Contr. "Chuck Swore for District 4"	500.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2,500.00
TOTAL (if last page of this schedule)				\$ 2,500.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)



Five Star Service Guaranteed

P.O. Box 1800

Saint Paul, Minnesota 55101-0800

03026 TRN

13150SBXP Y ST01

T412 P0

Business Statement

Account Number

0 001 2136 632

Statement Period

Nov. 1, 200

through

Nov. 30, 200

Page 1 of



HOME BUILDERS ASSN OF GREATER CR

POLITICAL ACTION SPECIAL ACCT

PO BOX 7

HIAWATHA IA 52233-0007

Balance 12/10/07**To Contact U.S. Bank****24-Hour Business Solutions:**

1-800-673-355

Telecommunications Device for the Deaf:

1-800-685-506

Internet:

usbank.com

NEWS FOR YOU

The U.S. Bank Visa® Gift Card is the perfect holiday gift... no wrapping required. Purchase one at usbank.com/gift or any U.S. Bank branch.

INFORMATION YOU SHOULD KNOW

Beginning February 11, 2008, the following pricing changes will go into effect: Overdraft Items Paid or Returned due to Insufficient Funds (NSF) will be \$19 per item for 1 occasion, \$35 per item for 2-4 occasions and \$37.50 for 5 or more occasions. The Continuous Negative Balance Fee will be \$8.00 per day.

Additional price changes for U.S. Bank's Business Checking and Treasury Management Services are effective January 1, 2008. You can review revised pricing (only those prices that changed) at <https://www2.usbank.com/tmpricing> beginning December 1, 2007. Log onto this secure Web site using the account number (omit leading zeros and dashes) and 5-digit zip code from your statement. If you are unable to access the internet for this information, please contact your local branch or call U.S. Bank 24-Hour Business Solutions at 1-800-673-3555.

FREE SMALL BUSINESS CHECKING

Account Number 0-001-2136-6322

U.S. Bank National Association

Account Summary

Member FDIC

	# Items		
Beginning Balance on Nov. 1		\$	1,863.72
Checks Paid	1		500.00-
Ending Balance on Nov. 30, 2007		\$	1,363.72

Checks Presented Conventionally

Check	Date	Ref Number	Amount
0612	Nov. 16	4545407821	500.00

Conventional Checks Paid (1)**\$ 500.0****Balance Summary**

Date	Ending Balance
Nov. 16	1,363.72

Balances only appear for days reflecting change.

ANALYSIS SERVICE CHARGE DETAIL

Account Analysis Activity for: October 2007

Account Number: 0-001-2136-6322

\$ 0.0

Analysis Service Charge assessed to 0-001-2136-6322

\$ 0.0